



## FLWEMS Paramedic Procedural Information For: **RESPONSE to TASER X26 APPLICATIONS**

### **Purpose**

The purpose of this procedure is to provide our department's personnel with direction regarding the emergency medical management of individuals who have been incapacitated by a TASER X26 or similar device.

### **Introduction**

The TASER X26 and similar devices are less-lethal devices utilized by the law enforcement agency to temporarily disable a violent subject, allowing for him/her to be taken into custody.

It delivers a high voltage, low amperage current that causes involuntary muscle contractions, resulting in the subject falling to the ground and being unable to resist being taken into custody. The actual electricity used (0.33 joules per pulse, 5 - 7 watts and .004 amps) will not cause any damage to the subject's skeletal or cardiac muscle. The only injuries may be puncture wounds from the probe(s) fired by the device or injuries resulting from the fall. The probes are #8 straightened fishhooks from McGill & Wright Fishing Company, can penetrate with a very slight hook to a maximum of 1/2 inch and may remain embedded in the subject's skin due to small barbs.

Due to the potential for intoxicant use, mental illness or underlying medical conditions, the law enforcement agency's procedures require that all subjects experiencing an application from a TASER X26 or similar device be medically evaluated by emergency medical personnel. This same procedure also requires that emergency medical personnel remove the probe(s) prior to the subject being transported to the law enforcement agency or any other location.

### **Indications**

1. Law enforcement personnel have requested emergency medical personnel to remove the probe(s).
2. Law enforcement personnel have cut the wires from the probe(s) to the TASER X26 or similar device.
3. There are no hazards present to emergency medical personnel or the patient.

### **Contraindications**

1. The patient refuses to allow emergency medical personnel to remove the probe(s).
2. One or more of the probe(s) has created a puncture wound in any area above the patient's clavicles, in the nipples or in the genitalia. In these cases, the probe(s) should not be removed and the patient should be transported to the closest open emergency department by either law enforcement or emergency medical personnel.

### **Procedure**

1. If the patient is in custody, ensure they remain in law enforcement restraints and law enforcement personnel are witnessing your interaction with the patient.
2. Attempt to determine if the patient is under the influence of any intoxicants, including alcohol, inhalants, prescription medication or illegal drugs. Also, attempt to determine if the patient has underlying medical conditions, paying particular attention to mental illness.
3. Determine how many five-second applications from the TASER X26 or similar device the patient experienced, including "drive stuns" (if applicable).
4. Determine if the patient has any allergies, paying particular attention to latex, alcohol or iodine.
5. Use Level 2 universal precautions (gloves and eye protection).

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6. Determine if the patient requires medical intervention other than probe removal. Be particularly mindful of the potential for head, neck, back and extremity injuries secondary to an uninhibited fall to the ground. As always, prioritize assessment and treatment (including probe removal) according to the patient's overall condition.
7. Before removing the probe(s), wipe the surrounding skin with alcohol or iodine.
8. While stretching the skin near the area of the puncture site and applying counter pressure with your weak hand, grasp the blunt end of the probe from the TASER X26 or similar device with either the gloved fingers of your strong hand, needlenose pliers or a hemostat and gently remove the probe by pulling and if necessary, twisting, to free the barb from the skin and subcutaneous tissues. The fingers on the weak hand applying counter pressure should be spread apart in an "L" pattern to keep the removed probe from striking the fingers during removal. Localized redness, appearing similar to a light burn, is known as a "signature mark", should be expected and not treated as a burn.
9. Visually inspect the probe and barb to ensure they are an intact unit and that no part or fragment remains in the wound tract. In cases where a part or fragment remains in the wound tract, needlenose pliers or a hemostat will be required for removal. However, emergency medical personnel should not remove a fragment unless it is clearly visible.
10. Apply pressure to the puncture wound site as required for up to five minutes. If excess bleeding occurs, transport the patient to the nearest open emergency department.
11. If the probe(s) are required for evidence, place the probe(s) in a container provided by law enforcement personnel. Otherwise, dispose of the probe(s) in a sharps container.
12. Read the Patient Information Sheet to the patient, provide him/her with a copy of it and the Healthcare Professional Information Sheet, and confirm that the patient understands the medical aspects of applications from the TASER X26 or a similar device.
13. Release the patient to the custody of law enforcement personnel or transport him/her to the nearest open emergency department.
14. Thoroughly document the incident utilizing the county run form and reporting software. If the patient was medically evaluated, the medical section within the reporting software should be completed.

**Patient Assessment**

When law enforcement officers utilize the TASER X26 or a similar device, it's often because the subject is exhibiting irrational and/or violent behavior. In many instances, intoxicants such as alcohol, prescription medication, inhalants and/or illegal drugs contribute to such behavior and can result in the subject experiencing acute changes in their mental, respiratory and/or circulatory status. Because of this phenomena, emergency medical personnel should use all resources necessary to determine what intoxicants are involved (if applicable), how much the subject ingested, injected or inhaled and what pre-existing medical conditions they may have.

Although it's commonly accepted that an application from a TASER X26 or similar device doesn't represent any lasting medical effects to the subject, the use of intoxicants can certainly contribute to an in-custody death. Therefore, if the use of intoxicants is suspected, emergency medical responders should ascertain the patient's mental status (including level of consciousness and Glasgow Coma Scale), respiratory status (respirations, lung sounds and pulse oximetry), circulatory status (skin condition, pulse, blood pressure), cardiac function (electrocardiogram), temperature, pupillary status and blood glucose.

Mental illness is also a common contributing factor to irrational and/or violent behavior and emergency medical responders should attempt to ascertain whether the patient has a history of such conditions.

Should the patient have any signs or symptoms of distress, emergency medical responders should follow county protocol and Advanced Cardiac Life Support (when applicable).

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**END OF INFORMATION – NOTHING FOLLOWS**